REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

(CFA-4) Summary Sheet

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3461 S. Westwood FT. 5. City, State, ZIP Code West Terre Hute, In: 47885 CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (include any nickname) David R. (Dave) Crockett Device Code Device Reserved Device	IS THIS AN AMENDMENT? Yes You						
Addition to Continue (see Substitute (substitute	COMMITTEE INFORMATION						
2. Acronym or Abbreviated Name (if any) 2. Acronym or Abbreviated Name (if any) 3. Committee Telephone Number (8/2) \$33 - 4483 4. Mailing Address (address where all campaign finance correspondence is received) 3. 46/ S. Lestuces III. 5. City, State, ZIP Code West Terre Houre, Thi. 47885 CANDIDATE INFORNATION (For Candidate's Committees) 7. Full Name of Candidate (include any nickname) Aurial R. (Adux) Crockett 9. Office Sought (include district number, if any. Not required for exploratory committee) 10. County of Residence 11. Check one: 11. Check one: 12. Reporting Period. 12. Reporting Period. 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments at the beginning of this reporting period. 15. Itemized (use Schedule A) 15. Unitemized 16. Add lines 15a and 15b in both columns 17. Add lines 15a and 15b in both columns 17. Add lines 15a and 15b in both columns 17. Add lines 15a and 17b in both columns 17. Add lines 17a and 17b in both columns 18. Candidate (use Schedule B) 19. Debts OWED DY the committee (use Schedule E) 20. Debts OWED DY the committee (use Schedule E) 20. Debts OWED DY the committee (use Schedule E)	1 Full Name of Committee (as on Statement of Organization) Check if this is a new r	name					
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8. Party Affiliation or If Independent Candidate David R. Dave Crockett	CANDIDATE INFORMATION (For Candidate's C	Commit	tees Only)				
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	CERTIFICATION		FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO	THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE		FILED
Signature of Treasurer	Title	Date 10/16/08	168 EBUNTY SUPERIOR COUL
Jag Julant	Campaign fresseres	Date	OCI 16
Signature of Cardidate (mapplicable)	/	10-16-08	90T 1 B 😅

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule, For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebailes, refurns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. iJusht, Shasley a Lowery 500 Ohio St. Terre Haute, In. 47807	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	100.00	100.0e	8/1/68 Dove Crockett
2.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 100.00		
TOTAL OF ALL PAGES OF SCHEDULE		• 0e		